



Standard Operating Procedure (SOP)	
Issued: 8/26/2020 (Updated 9/13/2021)	Revised: See Change Log (Appendix D)
SUBJECT: Investigation of COVID-19 in Pre-K-12 Schools	
Maine Center for Disease Control and Prevention Division of Disease Surveillance	

I. BACKGROUND AND RATIONALE

SARS-CoV-2, the virus that causes COVID-19, has become widespread globally and in the United States. Evidence indicates that children of all ages are susceptible to COVID-19 although their clinical presentation is often less severe than that seen in adults. However, severe disease is possible, including rare fatalities and a multisystem inflammatory syndrome in children that can lead to a severe and life-threatening illness in rare cases.

II. PURPOSE

This SOP provides a framework for responding to COVID-19 among students, teachers, or staff within a school. It will be updated as necessary. The guidance in this SOP is not exhaustive, nor does it replace a school's strategic plan for COVID 19 mitigation, or direct engagement with the Department of Education or Maine Center for Disease Control and Prevention (Maine CDC). The Maine DOE Nurse Consultants are Maine CDC's primary points of contact for schools.

III. OBJECTIVES

The primary reason to investigate cases or outbreaks of COVID-19 in schools is to control the spread, prevent or quickly identify outbreaks, and, with lessons learned from investigations, help prevent future outbreaks. Specific objectives of investigations may include, but are not limited to:

1. Implementing measures to prevent or mitigate transmission of COVID-19 within a school setting.
2. Determining the magnitude of the outbreak and characterizing chain(s) of transmission (*e.g.*, secondary transmission among children, school staff members, and household members).
3. Describing characteristics of school populations, including demographic, health status, clinical characteristics (for cases), and exposures, stratified by COVID-19 case status.

IV. METHODS

A. Case Definitions

Maine CDC will follow CSTE case definitions for COVID-19. These case definitions are subject to change.

The 2021 approved case definition can be found at https://www.cste.org/resource/resmgr/21-ID-01_COVID-19_updated_Au.pdf

B. Investigation Approaches

Interviews with school staff are useful to assess the school environment and strategies adopted by the school to prevent or mitigate COVID-19 spread. Gathering detailed information on school operations, space layout, number of staff members, teachers and students, class sizes (density), and daily schedule

(pick up, drop off, rotation through different classrooms and other school spaces) will help with understanding the daily routine and potential mixing among students from different classes. Maine CDC will initiate an investigation when it learns of a confirmed or probable case (or cases) associated with a school.

In the event that the school is informed of a confirmed or probable case (or cases) of COVID-19 prior to Maine CDC, the school or School Administrative Unit (SAU) will alert the Maine DOE by calling the reporting hotline at [\(207\) 624-6717](tel:2076246717) or completing the online DOE reporting form. The DOE will contact Maine CDC to report the case(s). During off hours, Maine CDC case investigators will call the school nurse at the school for an individual case. If the school nurse is unavailable the case investigator will leave a message. If there is an additional contact on the voicemail, the case investigator will reach out to that individual. If an outbreak investigation is opened during off hours, the outbreak investigator will notify DOE's school nurse consultant in such circumstances. Recommended public health actions will depend on the number of cases, the location of the cases, and the degree of contact those cases may have had with other students, teachers, or staff.

C. School Responsibilities

A designated school staff member affiliated with the school where a positive case is identified will be an essential part of the public health investigation. The designated person will serve as the primary point of contact for public health investigators. The designee should also contact the school nurse, applicable designated school administrators, school health advisors/school physicians, and, where possible, the primary care provider of the student who has tested positive.

As noted [in Section V \(Notification and Communication\)](#) below, the school nurse shall serve as the primary point of contact with families of confirmed cases. When the school nurse communicates with the family of a confirmed case, the school nurse should share [isolation](#) information as well as [quarantine](#) information for family members living in the same household. Based on the Maine CDC case investigation surge plan (serious or critical only), nurses may be able to give an anticipated release from isolation date, specifically for those who will not be investigated. Doing so will save time prior to Maine CDC contacting the family and may reduce the likelihood of further transmission. The school nurse or other designated school staff can make social service referrals with family's permission to covidsocialsupport@maine.gov, this can support the family with a variety of resources. Please reach out to a school nurse consultant or Maine CDC for more information.

The school nurse should recommend that the parent/guardian monitor other family members for symptoms of COVID-19. These include: fever (>100.4°F) or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea, confusion or change in mental status, persistent pain or pressure in the chest, blue/gray/pale skin/lips/nail beds, or inability to wake or stay awake.

The school nurse should also advise families to ensure that the COVID-19-positive student remain in proper isolation, especially from people who are at higher risk for getting sick from COVID-19. Families where a member has tested positive for COVID-19 should alert their health care provider, especially if symptoms worsen. In addition, the school nurse can provide a brief overview of the case investigation process, contact tracing, and Sara Alert system for the family. Symptomatic close contacts should seek a COVID-19 test and schools should not initiate contact tracing until the symptomatic close contact has received a positive COVID-19 test.

Designated school staff can then begin the process of determining who within the school may constitute a close contact. In general, a close contact is defined as an individual with exposure to the confirmed or probable case within 6 feet for 15 minutes or more (cumulatively in one day) regardless if individuals were wearing face coverings, or having direct physical contact with a person with confirmed COVID-19 during the infectious period (physical touch or direct contact with secretions or excretions of an infected individual).

Vaccinated close contacts do not need to quarantine unless they themselves become symptomatic. However, vaccinated close contacts should be tested 3-5 days following exposure and wear a mask until they receive a negative test result.

Designated school staff, along with other school officials, should make initial contact with the determined close contacts to ensure they begin their quarantine period in a timely manner. If close contacts need to quarantine from school but are determined while school is in session, they may complete the day. If private transport is unavailable, taking the bus home is acceptable. Schools will inform close contacts and/or parents that they will be enrolled in Sara Alert for monitoring before sending the close contact list to the DOE Contact Tracing Team through the approved process. Maine CDC case investigator will ask for the total number of close contacts, even those not uploaded in Sara Alert. Close contacts who are enrolled in the pooled testing program should be informed of their need to quarantine outside of school activities and monitor for symptoms. Do not include these close contacts on the Contact Tracing template submitted to DOE to avoid confusion for families.

D. Laboratory Testing

Maine CDC recommends testing for all close contacts of persons with SARS-CoV-2 infection. Unvaccinated close contacts should test as soon as possible after exposure, regardless of symptoms. If that test is negative, the close contact should be re-tested 5-7 days later. Vaccinated close contacts should test 3-5 days after exposure.

Because of the potential for asymptomatic and pre-symptomatic transmission, it is important that close contacts of individuals with SARS-CoV-2 infection be quickly identified and tested in the appropriate time frame. Unvaccinated and non-pooling close contacts must remain in quarantine for 10 days irrespective of the test result. Testing of close contacts also helps identify additional cases. This allows identification of further close contacts who should be in quarantine. **PCR confirmation of a positive antigen test is no longer required provided that the antigen test is conducted on an individual with a known exposure to a positive case or with a linked positive PCR pooled test.** In general, individuals who test positive should not be retested for 90 days following the date of the positive test result. However, an individual who develops new onset of symptoms consistent with COVID-19 infection during the 90-day period following the initial positive test collection date should be retested and should isolate until 24 hours after symptoms have resolved although there will not be contact tracing. An individual who tests positive again 90 days after the last positive test must complete isolation following the new, positive result.

Pooled testing participants do not need to be tested if identified as close contacts through school exposures, through extracurricular activity for example, since they will test on a weekly basis. Completeness of reporting for all individuals testing positive or negative can optimize investigation efforts for case classification and provide an initial assessment of attack rates when combined with line lists provided by the school.

Maine CDC will work with School Administrative Units (SAU) to identify potential locations where students, faculty, or staff could obtain COVID-19 testing. Maine CDC cannot guarantee the availability of on-site testing for every school experiencing an outbreak. State-sponsored sample collection sites can be found on Governor Mills' COVID-19 [site](#); additional options can be found at [Get-Tested-COVID19.org](https://www.get-tested-covid19.org).

Maine CDC does not investigate or accept home-based testing results. These are not counted as cases or in outbreaks. Schools may choose to accept home-based testing results. Maine CDC strongly encourages that schools that choose to accept a home-based test result do so only with those from a validated application that accompanies the test kit. This application will allow you to verify the collection date and patient. Maine CDC does not recommend accepting pictures of test kits as a validated result. A home-based test is not reported to the state and will not result in a confirmed or probable case.

E. School-Based Pooled Testing

The Maine CDC and Department of Education (DOE) have implemented a pooled PCR testing program, available to public and private schools (private Pre-K-only programs are not eligible to apply). Pooled testing involves mixing several test samples together in a “batch” or “pool” and then testing the pooled sample with a PCR test for detection of SARS-CoV-2.

If a pooled test result is negative, then all individuals within that pool are presumed negative and may remain in school. If a pooled test result is positive, then all individuals in the pool must be retested individually (see Table 1 below for an example timeline). The rapid point-of-care antigen test will be the primary source of this individual follow-up testing. SAUs that are not already enrolled in the Abbott BinaxNOW initiative are invited to complete that process.

Table 1. Example of Weekly Overview for Pooled PCR Testing Program

Day*	Monday	Tuesday	Wednesday	Thursday	Friday
Test Type	Pooled PCR samples are collected	Results from pooled PCR testing returns in 24-48 hours		Antigen testing	Second round of antigen testing, if needed
Action	Pooled samples are delivered to lab for processing.	If a positive PCR test returns from a pool, then antigen testing is performed on those who were in the pool the same or next day.		If a positive case is identified using rapid antigen, then the case leaves school and isolates. Initiate SOP. Other pooled participants return to class.	This will only occur if the first round of antigen testing did not detect a positive case. All students will remain in school if the second round does not identify a positive case and no further testing will occur until the next designated pooled PCR testing day.
*Schools will have a designated day to perform pooled testing, but not every schools pooled testing day will be Monday.					

If a school is in an outbreak status, then spacing requirements may return. For further guidance on pooled testing protocol and guidance, please review the materials provided in **Maine’s PreK-12 Testing Program: Frequently Asked Questions**. This includes required steps to participate, preconditions for pooled testing, vendor information, and logistics.

No matter a school’s pooled testing participation status, in the event of a positive case, contact tracing and isolation still apply. Note also that someone can have close contacts outside of their own pool and not all pool-mates will necessarily be close contacts. Pools are not formed on the basis of close contact determination.

Schools also have the option of using antigen testing as a standalone tool and should review the [guidance materials from DHHS](#).

F. Isolation, Contact Tracing, and Quarantine

All students, teachers, or staff who test positive for COVID-19, regardless of vaccination status, shall isolate until they meet the U.S. CDC criteria for release for [isolation](#).

After isolating the positive case, the school-designated contact tracer should identify all close contacts and report this total number to the Maine CDC case investigator. Close contacts must be notified for every COVID-19 case in students or staff (see Appendix A). The close contact definition is exposure within 6 ft for more than 15 minutes within a 24-hour period or any direct physical contact. In a school setting where there is no assigned seating the whole classroom will be counted as close contacts. Where assigned seating is strictly adhered to, close contacts will be identified using the definition above (within 6 feet for cumulative 15 minutes or direct physical contact).

(1) For one or two confirmed or probable case(s) in a student/staff/teacher in single or multiple classrooms:

- If no assigned seating: All other students/staff/teachers in that classroom/pod are considered close contacts regardless of face covering use.
 - Library, and cafeteria exposures for student/staff/teacher will follow US CDC's 6-foot, 15-minute recommendations. Any unique cases can be reviewed on a case-by-case basis by calling 1-800-821-5821 or call the DOE Hotline (207) 624-6717.
 - Not utilizing social distancing and masking as a mitigation strategy may result in an increased number of identified close contacts and increased transmission. Standard Maine CDC quarantine requirements for close contacts at schools not participating in the pooled testing program will remain in effect.
- Strategies to reduce the number of close contacts:
 - Assigned seating/seating charts are useful tools to make informed decisions regarding contact tracing.
 - When possible, physically distance **more than** 6 feet apart.
- The classroom where the case is located should be cleaned according to U.S. CDC guidelines found here: <https://www.cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html>.
- It is not necessary to wait 24 hours before cleaning or disinfecting schools.

(2) Bus exposures:

- In general, if a COVID-19 case is on a bus for fewer than 15 minutes cumulative within 24 hours, no one else on the bus is considered a close contact.
- In general, if a COVID-19 case is present on a bus for greater than 15 minutes cumulative within 24 hours those identified as being within six feet will be considered close contacts.
- Any bus that carried a confirmed or probable case should be cleaned according to U.S. CDC guidelines <https://www.cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html>

(3) After school activities:

- Anyone with more than 15 minutes within 24 hours of cumulative exposure within 6 feet or direct physical contact will be considered a close contact.

(4) Evaluation of sports-related activities:

- If a COVID-19 case plays a sport while infectious, close contacts will be considered to be individuals within 6 feet of the infected person for 15 minutes or longer, or who have any direct physical contact with the infected individual. Support staff of a team (*i.e.*, officials, referees, athletic trainers), and where applicable, team opponents, will be assessed individually by Maine CDC case investigators or school designated staff. This will depend on the nature of the activity, setup, mitigation strategies in place by the school staff and the assessment conducted by a case investigator.
- Those deemed to be close contacts may not play any sports during their period of quarantine. The exception to this is if they are enrolled in pooled testing or if they are vaccinated and asymptomatic. These school-related close contacts do not need to quarantine from school-related

activities.

- Relaxed outdoor mask recommendations do not exempt people from quarantine should they be deemed a close contact and are unvaccinated or not participating in pooled testing. Not utilizing social distancing as a mitigation strategy may result in an increased number of identified close contacts and increased transmission. Not utilizing masking as a mitigation strategy may result in increased transmission.

Close contacts must quarantine for 10 days from last COVID-19 exposure from school and school activities **except** if at least *one* of the following conditions applies to the close contact:

1. The close contact (staff or student) is vaccinated and if the exposure occurred more than 14 days after the individual's completion of the vaccine series. If the exposure occurred after vaccination but prior to the 14 days, the close contact must quarantine for the full time period: **or**
2. The close contact (staff or student) has a previous positive COVID-19 test result (molecular or antigen) collected within 90 days of the exposure: **or**
3. The close contact (staff or student) participates in weekly school pooled testing **and** the exposure was a school exposure; **or**
4. The school has a mandatory masking policy. If so, then an exposed classroom **student** does not need to quarantine from regular school-day activities when the student close contact was at least 3 feet from an infected student (laboratory-confirmed or a [clinically compatible illness](#)) provided that:
 - i. The school enforces consistent and correct use of well-fitting masks; **and**
 - ii. no direct physical contact occurred.

Exception #4 is limited to classroom exposures only. Exposures that occur in buses, cafeterias, and school-sponsored activities are not eligible for exception #4. The exception does not apply to teachers, staff or other adults in the classroom.

Staff and students who do not fall within exceptions 1-4 above must quarantine if they are a close contact, regardless of the location of exposure. Although pooled testing participants do not need to quarantine from school/school activities if exposure occurs at school, they must follow Maine CDC guidelines for community exposure.

Table 2: Summary of Quarantine Exceptions

After they have identified the close contacts who were within 6 feet of the COVID-positive individual for cumulatively 15 minutes or longer within a 24-hr period or who had direct contact, the school designated contact tracer will need to use the table below or description above to follow up. Every close contact will get a letter alerting them to the exposure and providing guidance (Appendix A).

For each close contact (CC) who is asymptomatic and who has not tested positive for COVID 19, use the following matrix to determine quarantine:

Where was the exposure? 		Outside of school	Classroom	Bus, lunch area, or other school areas
		What exceptions do they qualify for? 		
1	Fully vaccinated	No quarantine	No quarantine	No quarantine
2	Positive within 90 days and no longer infectious	No quarantine	No quarantine	No quarantine
3	Pool testing participant	Quarantine	Community quarantine/ May attend school-based activities*	Community quarantine/ May attend school-based activities*
4	School enforces mandatory masking policy, exposure was 3-6', & both CC & COVID+ case are students	Quarantine	Community & activity quarantine/May attend school-day hours**	Quarantine
5	None	Quarantine	Quarantine	Quarantine

* Individual may attend all school and school-affiliated activities, but must maintain quarantine outside of school activities

** Students may attend class and other school-day events, but must quarantine outside of the school day

G. Outbreak Response

Once a school reaches outbreak status¹ as determined by a Maine CDC outbreak investigator:

- All individuals associated with the school should be notified by the school of the outbreak (*see* Section V below). School officials should make such notifications in writing, using a template provided by Maine CDC (*see* Appendix A).
- A Maine CDC outbreak investigator will coordinate with the school, and each case will still be assigned a case investigator who will follow the standard investigation protocol.
- If three cases are spread across multiple classrooms:
 - All students/staff/teachers of any classroom where the student/staff/teacher attended a class are considered close contacts regardless of the setup of the classroom/pod or face covering use.
 - The school will follow cleaning guidance from U.S. CDC: <https://www.cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html>
- School outbreak status does not necessarily warrant school closure and can be evaluated on a case-by-case basis.
- Maine CDC may recommend suspending all in person extra-curricular activities for the duration of the outbreak.
- In situations where students are in a single classroom and teachers rotate through the classroom, where there is a single case, all the teachers who rotated through the classroom will be considered close contacts.
- Close contacts may expand to include the entire school depending on the case or outbreak investigation, considering factors such as adherence with public health guidelines and the age of

¹ An outbreak is defined as 3 or more PCR confirmed cases from different households within 14-days.

- the students.
- Outbreaks are preliminarily closed 14-days after the last positive test or symptom onset, whichever is later, and officially closed 28-days after the last positive test or symptom onset date, whichever is later.

V. NOTIFICATION AND COMMUNICATION

Notification of a Confirmed or Probable Case to Schools

The Maine CDC case investigator will alert school nurses of a laboratory confirmed or probable COVID-19 case in the schools and begin an investigation. Case investigators must inform the school if the case was physically in attendance during their infectious period. Case investigators are encouraged to inform the school if the case was in attendance during their exposure period. Maine CDC will have a designated investigator(s) who will work closely with the Maine Department of Education (DOE) on COVID-19 related matters in schools. Maine CDC and Maine DOE School Nurse Consultant will monitor new cases.

Notification of a Confirmed or Probable Case to Maine CDC

School officials may be notified of a confirmed or probable case among a student or staff member by the individual or parents (if the case is a student). If school staff are notified by a parent/guardian that their child received notice from their health care provider that their COVID-19 test was positive, school staff should contact the school nurse. The school nurse or designated staff will report the suspect case using the DOE [Positive Case Reporting Form](#) or by calling the DOE COVID-19 Hotline at 624-6717 . Once Maine CDC receives the positive lab report a case investigator will begin the COVID-19 investigation. The school will be notified by either Maine DOE or Maine CDC that the case has been confirmed and the school will begin its notifications of close contacts. The school nurse will be the communication link among the family, the Maine DOE School Public Health Response Team, and the Maine CDC.

Communication with Family Members

Maine CDC recommends that the school nurse communicate with the family of a confirmed or probable case (when that case is a student). The school nurse will be best suited to provide information to the family and reassure the family that Maine CDC investigators will be in contact with them. The school nurse should also reach out to the DOE reporting hotline, 207-624-6717 or use the reporting link to inform Maine DOE of the case. Maine DOE's School Nurse Consultant will coordinate with Maine CDC's school investigator(s). The school should notify family members of students that will be in quarantine. This should include information about Sara Alert and symptom monitoring. A sample letter is available in Appendix A.

Communication with School Community

Maine CDC recommends that school community members be notified when a confirmed or probable case is detected that is associated with the school. The school is best able to notify parents, staff, teachers, and other community stakeholders (e.g., Board of Education, Superintendent, etc.) of the confirmed or probable case(s). Template letters for such communication are available in the appendices. Maine CDC strongly recommends confirming COVID-19 cases and outbreaks prior to schools sending public communications.

Public Reporting

Maine CDC may report publicly when an epidemiological investigation has confirmed an outbreak of COVID-19 associated with a school, as it does in other settings. Superintendents should notify their school community before Maine CDC announces a school is in outbreak status when possible. In general, such investigations are opened after three or more epidemiologically linked cases are identified within a 14-day period.

After Hours

A Maine CDC case investigator will reach out to a school nurse when identifying a confirmed or probable

case who attended school while infectious. If the school nurse is unavailable the case investigator will leave a message. If there is an additional contact on the voicemail, the case investigator will reach out to that individual prior to 5 PM. If no contact has been made, the Maine CDC case investigator will reach out to the DOE in a final attempt to contact the school. If Maine CDC opens an outbreak investigation after hours, the outbreak investigator may contact the superintendent of the school administrative unit as well as the DOE’s on-call contact after hours or the next business day.

VI. CONTACT TRACING PROTOCOLS IN SCHOOLS

Maine DOE will work with school officials to conduct contact tracing and symptom monitoring for close contacts of confirmed COVID-19 cases within schools.

Maine uses a platform called Sara Alert to conduct symptom checks on close contacts of confirmed cases. The Maine DOE Contact Tracing team will enroll asymptomatic close contacts of confirmed cases—whether students or staff—into Sara Alert for daily symptom monitoring during the quarantine period if the close contact is not vaccinated and is not enrolled in pooled testing. Maine DOE will monitor those close contacts during their quarantine period and, if any of those individuals becomes symptomatic, will provide guidance on testing and other clinical evaluation. The DOE school nurse consultant and a Maine CDC school investigator will have access to the Sara Alert system. Note that school contacts will be enrolled into a dedicated jurisdiction within Sara Alert.

VII. GLOSSARY

Term	Definition
Close contact	In general, being within 6 feet of an infected person (with or without a face mask) for at least 15 minutes (cumulatively in a day), or having unprotected direct physical contact with a person with confirmed COVID-19 during the infectious period
Community transmission	Occurs when individuals acquire COVID-19 through contact with someone in their local community, rather than through travel to an affected location.
Confirmed case	A person who has tested positive for SARS-CoV-2 infection (the virus that causes COVID-19) using a molecular test.
Contact tracing	Process of identifying individuals who have had close contact (see definition above) with someone infected with COVID-19
Cohort	A consistent group of students and staff who interacts with each other but not with members of other groups on a regular basis. When in a cohort, each group must physically distance themselves from each other and from other cohorts.
Direct physical contact	Direct contact with any person infectious with COVID-19 in which contact with secretions or excretions cannot be ruled out
COVID-19	Abbreviation for the disease caused by the novel coronavirus SARS CoV-2
Incubation period	The time between exposure to an infection and the appearance of first symptoms. The virus that causes COVID-19 has an incubation period of 2 -14-days.
Infectious period (asymptomatic cases)	2-days prior to testing (the date of the swabbing was conducted) until federal CDC criteria to discontinue isolation are met
Infectious period (symptomatic cases)	2-days before any symptom onset within 10 days prior to positive test result until federal CDC criteria to discontinue isolation are met
Isolation	Process of separating individuals who are infected with COVID-19 from others. Isolation lasts a minimum of 10-days from symptom onset if symptomatic. If a person infected with COVID-19 has no symptoms, isolation lasts a minimum of 10 days from the date of test specimen collection (test). For individuals with severely

	immunocompromising conditions, isolation is at least 20-days.
Outbreak	3 or more confirmed cases from different households within 14-days linked in space (<i>i.e.</i> , same school, same event etc.).
Pooled testing participant	An individual who is participating in school pooled testing that has either tested in the most recent pooled testing or was absent and used an antigen or molecular test in place of pooled testing.
Protocol	Recommended actions to follow in the event of a probable or confirmed case of COVID-19
Probable case	Individual who has a positive antigen test, or is a symptomatic close contact of a lab-tested case of COVID-19
Quarantine	Process of separating and restricting the movement of individuals who were in close contact with someone who tested positive or had symptoms of COVID-19.. Persons in quarantine should get tested, and self-monitor for symptoms and seek medical advice if needed.
Screening	Assessing individuals for symptoms of COVID-19 verbally or via self/parent attestation. Temperature checks may be performed by the school if desired.
Symptomatic individual	A person who is experiencing one or more of the symptoms of COVID-19 as defined in U.S. and Maine CDC guidelines.
Testing	Three types of tests are available for COVID-19: molecular, antigen, and antibody tests. Molecular and antigen tests indicate if you have a current infection while antibody tests indicate a previous infection. Throughout this document, 'testing' refers to either molecular or antigen-based tests to diagnose a person with current COVID-19 infection.

Appendix A: Sample notification letters to school communities

Dear Staff, Students, and Families,

This letter is to inform you that an individual associated with [School] recently tested positive for Coronavirus Disease 2019 (COVID-19). We are informing you out of an abundance of caution. Please monitor yourself/your student for signs and symptoms. Call a health care provider if symptoms start. Stay home if you are sick or are experiencing any listed symptoms

COVID-19 is a respiratory illness that ranges from mild to severe. It can be more severe in adults 60 years and older and in those with underlying conditions. The virus mainly spreads when an infected person coughs or sneezes and an uninfected person breathes in the virus. Signs and symptoms include:

- fever or chills
- cough
- shortness of breath or difficulty breathing
- fatigue
- muscle or body aches
- headache
- new loss of taste or smell
- sore throat
- congestion or runny nose
- nausea or vomiting
- diarrhea
- confusion
- pressure or pain in the chest
- blue/gray-tinged skin/lips/nail beds
- inability to wake or stay awake

Please keep in mind that many things can cause respiratory illness, so students and staff should be up-to-date on influenza and routine vaccinations.

Maine DOE or a school representative will contact you directly if you are identified as a close contact of someone who tested positive. Close contacts who are unvaccinated and not a pooled testing participant will be asked to quarantine from school for 10-full-days from last exposure to the positive individual. All unvaccinated close contacts will be asked to quarantine from non-school activities as well. A negative test result does not get an individual out of quarantine.

Maine CDC recommends prevention measures to prevent the spread of COVID-19. These measures include proper handwashing with soap and warm water, which is especially important after using the bathroom, before eating, and after blowing your nose, coughing, or sneezing. When soap and water is not available, use an alcohol-based hand sanitizer with at least 60 percent alcohol. Avoid touching your eyes, nose, and mouth with unwashed hands and avoid close contact with people who are sick. Stay home while you are sick and avoid close contact with others. Wear a cloth face covering in public indoor spaces, especially if you are not vaccinated. Cloth face coverings are recommended in schools and childcare settings for people over 5 years of age. Get a COVID-19 vaccine when it is available to you. When in public, avoid social distances of less than 6 feet and direct physical contact.

Questions for the school can be directed at (Name of school representative) by calling (contact number). For general COVID-19 questions, dial 211 (or 1-866-811-5695). You can also text your ZIP code to 898-211 or email info@211maine.org. Call a health care provider for questions about your symptoms. More information can be found at www.maine.gov/dhhs/coronavirus or www.cdc.gov/coronavirus.

Sincerely,

Sample notification letter for close contacts who meet no quarantine exceptions (Table 2 above)

Dear ,

This letter is to inform you that Maine CDC identified you/your student as a close contact to a Coronavirus Disease 2019 (COVID-19) case from a school-based exposure. This means that you/your student will need to quarantine at home for 10-full-days from last exposure to this individual. While a negative test result will not remove the requirement for you/your student to quarantine, testing is recommended. Unvaccinated close contacts should test as soon as possible after exposure, regardless of symptoms and if that test is negative, the close contact should be re-tested 5-7 days later. Five to seven days is the average length of time it takes to have enough virus in the body to show up on a test result. If you/your student tests positive, it may increase the length of time that you/your student would need to stay home. Currently, you/your student can come back to school on [DATE] so long as they do not have any symptoms and have not tested positive.

All unvaccinated non-pooling close contacts' names and phone numbers will be uploaded to Sara Alert and they will start receiving text messaging. Close contacts can opt-out by blocking the text. Blocked text messages will receive one phone call from a contact tracer to check in. A contact tracer will also call those (parents of or non-minor close contacts) without a cell phone number, those needing interpreter services or any (guardians of) close contacts reporting symptoms. You will receive a message from the SARA Alert system for symptom monitoring and a contact tracer will call you if needed.

COVID-19 is a respiratory illness that ranges from mild to severe. It can be more severe in adults 60 years and older and in those with underlying conditions. The virus mainly spreads when an infected person coughs or sneezes and an uninfected person breathes in the virus. Signs and symptoms include:

- fever or chills
- cough
- shortness of breath or difficulty breathing
- fatigue
- muscle or body aches
- headache
- new loss of taste or smell
- sore throat
- congestion or runny nose
- nausea or vomiting
- diarrhea
- confusion
- pressure or pain in the chest
- blue/gray-tinged skin/lips/nail beds
- inability to wake or stay awake

Maine CDC recommends prevention measures to prevent the spread of COVID-19. These measures include proper handwashing with soap and warm water, which is especially important after using the bathroom, before eating, and after blowing your nose, coughing, or sneezing. When soap and water is not available, use an alcohol-based hand sanitizer with at least 60 percent alcohol. Avoid touching your eyes, nose, and mouth with unwashed hands and avoid close contact with people who are sick. Stay home while you are sick and avoid close contact with others. Wear a cloth face covering in public

indoor spaces, especially if you are not vaccinated. Cloth face coverings are recommended in schools and childcare settings for people over 5 years of age. Get a COVID-19 vaccine when it is available to you. When in public, avoid social distances of less than 6 feet and direct physical contact.

Questions for the school can be directed at (Name of school representative) by calling (contact number). For general COVID-19 questions, dial 211 (or 1-866-811-5695). You can also text your ZIP code to 898-211 or email info@211maine.org. Call a health care provider for questions about your symptoms. More information can be found at www.maine.gov/dhhs/coronavirus or www.cdc.gov/coronavirus.

Sincerely,

Sample notification letter for close contacts who meet exceptions 1-4 in Table 2 above:

Dear ,

This letter is to inform you that Maine CDC identified you/your student as a close contact to a Coronavirus Disease 2019 (COVID-19) case from a school-based exposure. You/your student will not need to quarantine **from the classroom (and other school-based activities if you/they meet exceptions 1-3, see table below)** but quarantine rules apply at home and in the community for individuals who meet exceptions 3-4. While a negative test result will not remove the requirement for you/your student to quarantine, testing is recommended. Vaccinated close contacts should test 3-5 days after exposure. Unvaccinated close contacts should test as soon as possible after exposure, regardless of symptoms and If that test is negative, the close contact should be re-tested 5-7 days later. Five to seven days is the average length of time it takes to have enough virus in the body to show up on a test result. If you/your student tests positive, it may increase the length of time that you/your student would need to stay home. Currently, you/your student can return to school immediately so long as you/they do not have any symptoms and have not tested positive.

A Guideline to Quarantine Exceptions

For each close contact (CC) who is asymptomatic and who has not tested positive for COVID-19:

Where was the exposure?		Outside of school	Classroom	Bus, lunch area, or other school areas
What exceptions do they qualify for?				
1	Fully vaccinated	No quarantine	No quarantine	No quarantine
2	Positive within 90 days and no longer infectious	No quarantine	No quarantine	No quarantine
3	Pool testing participant	Quarantine	Community quarantine/ May attend school-based activities*	Community quarantine/ May attend school-based activities*
4	School enforces mandatory masking policy, exposure was 3-6', & both CC & COVID+ case are students	Quarantine	Community & activity quarantine/May attend school-day hours**	Quarantine
5	None	Quarantine	Quarantine	Quarantine

* Individual may attend all school and school-affiliated activities, but must maintain quarantine outside of school activities

** Students may attend class and other school-day events, but must quarantine outside of the school day

COVID-19 is a respiratory illness that ranges from mild to severe. It can be more severe in adults 60 years and older and in those with underlying conditions. The virus mainly spreads when an infected person coughs or sneezes and an uninfected person breathes in the virus. Signs and symptoms include:

- fever or chills
- cough
- shortness of breath or difficulty breathing
- fatigue
- muscle or body aches
- headache
- new loss of taste or smell
- sore throat

- congestion or runny nose
- nausea or vomiting
- diarrhea
- confusion
- pressure or pain in the chest
- blue/gray-tinged skin/lips/nail beds
- inability to wake or stay awake

Please keep in mind that many things can cause respiratory illness, so students and staff should be up-to-date on influenza and routine vaccinations.

Maine CDC recommends prevention measures to prevent the spread of COVID-19. These measures include proper handwashing with soap and warm water, which is especially important after using the bathroom, before eating, and after blowing your nose, coughing, or sneezing. When soap and water is not available, use an alcohol-based hand sanitizer with at least 60 percent alcohol. Avoid touching your eyes, nose, and mouth with unwashed hands and avoid close contact with people who are sick. Stay home while you are sick and avoid close contact with others. Wear a cloth face covering in public indoor spaces, especially if you are not vaccinated. Cloth face coverings are recommended in schools and childcare settings for people over 5 years of age. Get a COVID-19 vaccine when it is available to you. When in public, avoid social distances of less than 6 feet and direct physical contact.

Questions for the school can be directed at (Name of school representative) by calling (contact number). For general COVID-19 questions, dial 211 (or 1-866-811-5695). You can also text your ZIP code to 898-211 or email info@211maine.org. Call a health care provider for questions about your symptoms. More information can be found at www.maine.gov/dhhs/coronavirus or www.cdc.gov/coronavirus.

Sincerely,

Sample notification letter for outbreaks

Dear Staff, Students, and Families,

This letter is to inform you that there is an outbreak of Coronavirus Disease 2019 (COVID-19) at (School Name). An outbreak means that there are three or more confirmed cases of COVID-19 within a 14-day period that are epidemiologically linked. Based on recommendations from the Maine CDC, we are cleaning the school/classrooms and closing the school or classroom to help prevent further spread of COVID-19. Your child can return on (date). Please monitor yourself/your student for signs and symptoms. Call a health care provider if symptoms start. It is important that you call a health care facility before you show up in person.

COVID-19 is a respiratory illness that ranges from mild to severe. It can be more severe in adults 60 years and older and in those with underlying conditions. The virus mainly spreads when an infected person coughs or sneezes and an uninfected person breathes in the virus. Signs and symptoms include:

- fever or chills
- cough
- shortness of breath or difficulty breathing
- fatigue
- muscle or body aches
- headache
- new loss of taste or smell
- sore throat
- congestion or runny nose
- nausea or vomiting
- diarrhea
- confusion
- pressure or pain in the chest
- blue/gray-tinged skin/lips/nail beds
- inability to wake or stay awake

Please keep in mind that many things can cause respiratory illness, so students and staff should be up-to-date on influenza and routine vaccinations.

Maine DOE or a school representative will contact you directly if you are identified as a close contact of someone who tested positive. Close contacts will be asked to quarantine for 10-days from last exposure to the positive individual. A negative test result does not get an individual out of quarantine.

Maine CDC recommends prevention measures to prevent the spread of COVID-19. These measures include proper handwashing with soap and warm water, which is especially important after using the bathroom, before eating, and after blowing your nose, coughing, or sneezing. When soap and water is not available, use an alcohol-based hand sanitizer with at least 60 percent alcohol. Avoid touching your eyes, nose, and mouth with unwashed hands and avoid close contact with people who are sick. Stay home while you are sick and avoid close contact with others. Wear a cloth face covering in public indoor spaces, especially if you are not vaccinated. Cloth face coverings are recommended in schools and childcare settings for people over 5 years of age. Get a COVID vaccine when it is available to you. When in public, avoid social distances of less than 6 feet and direct physical contact.

Questions for the school can be directed at (Name of school representative) by calling (contact number). For general COVID-19 questions, dial 211 (or 1-866-811-5695). You can also text your ZIP code to 898-211 or email info@211maine.org. Call a health care provider for questions about your symptoms. More information can be found at www.maine.gov/dhhs/coronavirus or www.cdc.gov/coronavirus.

Sincerely,

Appendix B: Change Log

Updated 09/13/2021

Date of original version: 8/26/2020

Date of Change	Description of Change	Author
9/9/2020	To reflect designation of close contacts from school sports	Team
9/15/2020	To clarify conditions under which an outbreak investigation is opened	Team
9/23/2020	To clarify the definition of close contacts in an outbreak	Team
9/28/2020	To clarify case investigation process, AHOC, and bus windows	Team
9/29/2020	To clarify the role of antigen testing and, separately, school sports by creating Appendix B	Team
9/30/2020	To clarify bus exposures and, separately, to add Appendix C for school-based testing documents	Team
10/2/2020	To clarify cleaning guidance and community-based sports	Team
10/4/2020	To add Appendix D, which will track all subsequent revisions	NDS
10/31/2020	Updated Outbreak G section to match Table 4	AF
11/14/2020	Updated Community sports link, probable case investigation, outbreak school letter	AF
12/8/2020	Updated with changes to definition of “probable case,” case investigation prioritization, contact tracing, quarantine, and community sports	JML
12/12/2020	Updated background section and formatting	AF
2/25/2021	Updated requirements of quarantine and isolation for those with a previous positive test in the last 90 days, quarantine requirements for fully vaccinated individuals; Addition to role of school nurse, DOE contact tracing team and superintendent if school deemed an outbreak, insert page numbers; Updated guidance regarding quarantine of individuals who are identified as close contacts of a case and use of antigen testing, role of the school nurse clarified use of BinaxNOW testing for essential teachers/staff	MA
3/31/2021	Clarify the preliminary and official ending of outbreak timelines, updated close contacts within a school setting	MA
5/13/2021	Addition of pooled testing guidance and home-based testing clarification on close contact for those in School Pooled testing, updated testing guidance in sample notification letter for close contacts, updated infectious period for symptomatic cases definition in glossary	MA
8/3/2021	Simplification of close contact definition, update	Team

	testing recommendations for vaccinated individuals, addition of guidance for informing pooling close contacts of the need to quarantine in the community, addition of 4 new COVID-19 symptoms	
8/10/2021	Interpretation of federal exception for quarantine; reorganization of isolation and quarantine section, addition of Table 2 for understanding quarantine exceptions	Team
8/12/2021	Updated exception to close contact quarantine per US CDC changes.	NDS
9/8/2021	Clarified Purpose, created a “cleaner” table 2, ordered contact tracing section before quarantine and concomitant exceptions, added proscription for essential workers to staff exceptions to quarantine, removed tables 3 & 4 and summarized the difference between assigned and non-assigned seat contact tracing in-text, removed emergency orders section from pooled testing description, changed BinaxNOW references to generic antigen	CS